

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	22/04/2019 13:57
Date Of Accident	20/04/2019 11:55
Exact Location Of Accident	UPPER CHANGI RD EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU6880J
Insured/Policyholder	
Name Of Registered Owner	RELIABLE RIDES PTE LTD
Co Reg No	201611527N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81669797

Vehicle Particulars

Manufacturer	HONDA
Model	FREED
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096638911-01
Cover Note Number	-

Driver

Name of Driver	YEO HIAP LEONG
NRIC No	S1642700D
Date Of Birth	03/11/1964
Occupation	OUTDOOR
Date Of Driving Pass	27/07/1988
Driving Experience	30 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86616564
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 467 ADMIRALTY DRIVE #04-187
Postcode	750467
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : UNKNOWN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG UPPER CHANGI RD EAST ON THE CENTER LANE, SUDDENLY VEH B (BEARING NO SJK9352Z) WHICH WAS IN FRONT OF ME JAMMED BRAKE, I MANAGE TO BRAKE BUT CANNOT STOP IN TIME. AS THE RESULT, MY VEH HIT ONTO VEH B REAR PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJK9352Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name YEO HIAP LEONG

Approximate Age

Injuries Sustain BACK

Injured person in which vehicle? SLU6880J

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

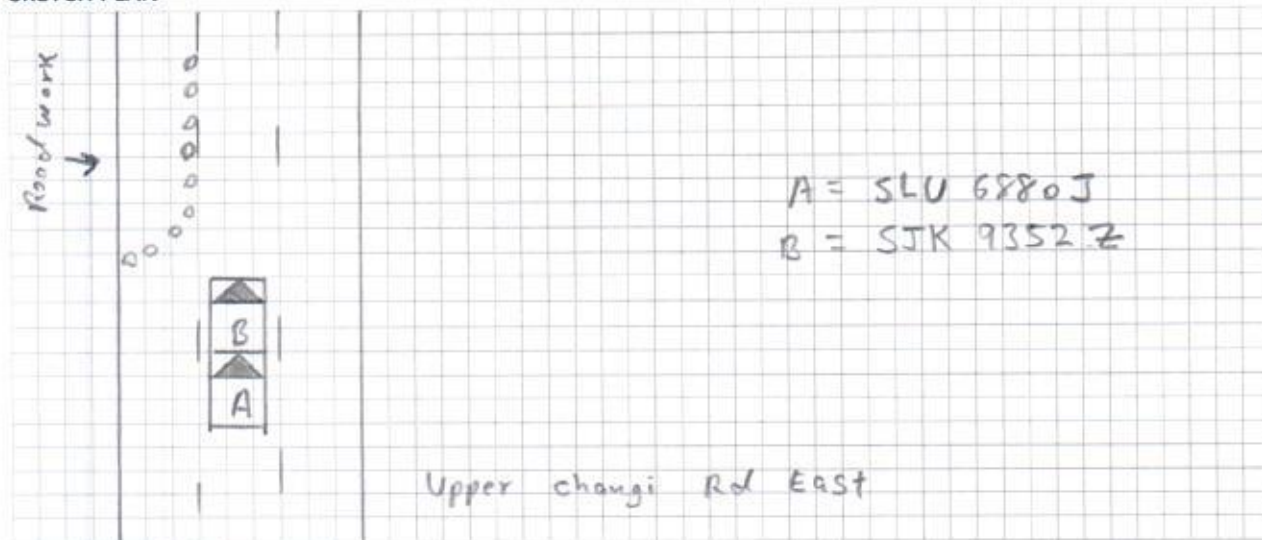


Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:


REPUBLIC OF SINGAPORE DRIVING LICENCE




Licence Number **S1642700D**
 Name
YEO HIAP LEONG
 Birth Date **03 Nov 1964**
 Issue Date **28 May 2003**

000520194H

Land Transport Authority



VOCATIONAL LICENCE
 Licence No : **S1642700D**
 Name : **YEO HIAP LEONG**



Please visit www.lta.gov.sg to check the status of this vocational licence

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1642700D



Name
YEO HIAP LEONG
 楊 協 良
 Race
CHINESE
 Date of birth **03-11-1964** Sex **M**
 Country of birth
SINGAPORE

S1642700D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms
 PASS DATE **27 Jul 1983**

NP 428A

000520194H

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	10/09/2018

000520194H

4695220

000520194H

NRIC No. **S1642700D**



Date of issue
18-03-2011
 Address
APT BLK 467 ADMIRALTY DRIVE
#04-187
SINGAPORE 750467

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="20/04/2019 13:54"/>
Vehicle No.(For Motor)	<input type="text" value="SLU6880J"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5096638911-01		RELIABLE RIDES PTE LTD	201611527N	GPC	drivo CLASSIC	SLU6880J	SLU6880J	11/12/2018	10/12/2019

Continue

Claim Handling

Accident MT/1041144

Policy No.	5096638911-01	Vehicle No.	SLU6880J	GST Registration No.	
Certificate No.					
Policyholder Name	RELIABLE RIDES PTE LTD			Policyholder NRIC	20161
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)	81669797	Contact No.(Home)	
Email Address		Special Remark		eCode	No
KIX	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
▼ Accident Details					
Report Date	22/04/2019 15:30	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	20/04/2019	Time of Accident hh:mm	11:55	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	UPPER CHANGI RD EAST				
▼ Excess					
Own Damage Excess	1,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	3,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	3,000.00		
▼ Benefits					
▼ GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History	22/04/2019 15:31:54 System changed GST Status Verified from No to Yes				
▼ Policyholder Mailing Address					
Address 1	8 KAKI BUKIT AVENUE 4	Address 2	#05-50 PREMIER @ KAKI BUKIT	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	41587
Unit No.	05-50	Related Policy Number	S106937496		
▼ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	YEO HIAP LEONG	Driver NRIC	S1642700D	Driver DOB	03/11/
Register Date of Driver License	27/07/1988	Driver Age	54	Driving Experience	30
Contact No.(Mobile)	86616564	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 467 #04-187	Address 2	ADMIRALTY DRIVE	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	75046
Unit No.	04-187				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 002 New

Claim Type *	OD-MX	Insured Name	RELIABLE RIDES PTE LTD
Contact No.(Mobile)		Contact No.(Home)	
Email Address		OI Vehicle Number	SLU6880J
Claim Description	SLU6880J / SJK9352Z ON 20 Apr 2019		
Preferred Workshop	0	Insured Liability	Fully at Fault
Report No.	0	Preferred Repair Option	Preferred Workshop, Name unknown
Finalisation	Yes	GIA report	Received
Date Registered			22/04/2019 16:33
Report Taken By			LEW SHAN HUI
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No. MT/1041144 Claim No. 002

Last Doc. Received

☒ Yes ☐ No

Upload Date

22/04/2019 16:34

Path *

Choose File No file chosen

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Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:34	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:34	SAS	Normal	SAS 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:34	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:34	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Apr 2019 16:33	Photos	Normal	Photos 2019-4-22

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Scan and uploading